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## BIB DATA SHEET

CONFIRMATION NO. 1614

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/563,707	01/06/2006 RULE	514	1614	ON/4-33258A		
<b>APPLICANTS</b> Michaela Kneissel, Basel, SWITZERLAND; Mira Susa Spring, Basel, SWITZERLAND; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP04/07437 07/07/2004 <b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0315965.4 07/08/2003 UNITED KINGDOM 0315963.9 07/08/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 04/21/2006						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/AMY A LEWIS/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> SWITZERLAND	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 17	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> NOVARTIS CORPORATE INTELLECTUAL PROPERTY ONE HEALTH PLAZA 104/3 EAST HANOVER, NJ 07936-1080 UNITED STATES						
<b>TITLE</b> Use of rapamycin and rapamycin derivatives for the treatment of bone loss						
<b>FILING FEE RECEIVED</b> 1300	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		